

Police Ride-Along Program Letter to Applicant

DEAR RIDE-ALONG PROGRAM APPLICANT:

Thank you for your interest in the Mountain View Police Department's Ride-Along Program. **To participate, you must be at least 14 years of age.** To apply, please complete the attached application AND the information below. **Please return your application and this sheet to the Mountain View Police Department front counter or fax to us at (650) 903-6122.**

Applications may take up to two weeks to process, at which time you will be notified of your ride-along day and time. Please plan on arriving 15 minutes early and wear weather-appropriate clothing. In addition, please keep in mind that there will most likely not be an opportunity for food or snack breaks, so please be prepared. Also, no weapon of any type (pocket knives, pepper spray, etc.) may be on your person during your ride-along.

If you must cancel, please let us know as far in advance as possible by calling our ride-along coordinator at (650) 903-6186 or, if you are cancelling on the day of your ride-along, please call our Records Unit at (650) 903-6344.

Name _____

Please place a check mark next to each and every day/time that would normally work in your schedule for the ride-along:

- | | | |
|--|---|---|
| <input type="checkbox"/> Sunday, 8:00 a.m. - 12:00 noon | <input type="checkbox"/> Monday, 8:00 a.m. - 12:00 noon OR 9:30 p.m. - 1:30 a.m. | <input type="checkbox"/> Tuesday, 4:00 p.m. - 8:00 p.m. |
| <input type="checkbox"/> Wednesday, 12:00 noon - 4:00 p.m. OR 9:30 p.m. - 1:30 a.m. | <input type="checkbox"/> Thursday, 6:00 p.m. - 10:00 p.m. | <input type="checkbox"/> Friday, 4:30 p.m. - 8:30 p.m. |
| <input type="checkbox"/> Saturday, 8:00 p.m. - 12:00 midnight OR 12:00 noon - 4:00 p.m. | | |

In the next 30 days, are there any specific days you have checked above that will not work for you? If so, please list the dates below.

Applicant's Copy

1. Waiver signed by rider, and parent if under age.
2. Clothing should be neat in appearance and may include collared shirt, blouse or jacket, slacks and shoes. Sandals, T-shirts, tank tops, shorts and ripped or torn blue jeans are not permitted. Hats and ball caps cannot be worn in the Police vehicle.
3. Seat belts are to be worn at all times that the Police vehicle is in operation.
4. All names, matters pertaining to evidence or statements in any investigation are to be held confidential.
5. Cameras and recording equipment may not be taken on tour unless expressly allowed in writing by the Office of the Chief.
6. Participants must obey the orders and instructions given by the Officer.
7. Participants must not leave the patrol car unless otherwise directed by the Officer.
8. At no time will the rider cause any type of distraction that may affect the Officer. This includes excessive conversation, etc.
9. When the patrol unit is assigned a dangerous call, the rider will be dropped off at a safe location and must remain there until he/she is retrieved by his/her Officer partner or another Police unit.
10. The rider will furnish his/her own transportation to and from the Police Department.
11. Riders who have been assigned to a specific time and cannot participate are to contact the ride-along coordinator as soon as possible at (650) 903-6186. If the rider is cancelling on the day of the scheduled ride, they are to contact the Records Division at (650) 903-6344.
12. Persons with extensive criminal backgrounds will not be allowed to ride.
13. With the exception of sworn Police Officers, no person shall carry any weapon. This includes, but is not limited to: firearms, chemical mace, stun guns and batons.
14. Ride-Alongs shall not operate or handle the Police vehicle or any equipment contained within the vehicle.
15. These rules are general; further instruction may be given by the Field Supervisor and the Patrol Officer.

Police Ride-Along Program Release and Waiver

I have requested permission of the City of Mountain View to participate in the POLICE RIDE-ALONG PROGRAM so that I can observe firsthand the activities of the City of Mountain View Police Department and/or use the facilities of the City of Mountain View Police Department. I have been fully informed and fully understand the risks involved in such observation and/or use of facilities and vehicles.

I, _____, grant permission to the City of Mountain View Police Department personnel to use the personal information contained in this request to conduct a computerized and/or telephonic inquiry into my criminal history (if any). I understand that this inquiry will reveal all arrests and convictions sustained by me in the State of California, including arrests and convictions sustained as a juvenile. This inquiry will also result in information regarding any current supervised or unsupervised release I am subject to stemming from a conviction. I further authorize the City of Mountain View Police Department personnel to conduct a similar criminal history inquiry into databases containing information regarding arrests and/or convictions in states other than California at their discretion. I understand that arrest, conviction or current supervised/unsupervised release status of any kind could preclude me from participating in the RIDE-ALONG PROGRAM at the discretion of the City of Mountain View Police Department personnel.

I understand that my observation and/or use of facilities and vehicles and participation in the RIDE-ALONG PROGRAM will involve my riding along with a sworn Police Officer, Level I Reserve Officer or Community Service Officer, while the Officer(s) goes about regular patrol duties. I understand that Officers are frequently required to drive their patrol vehicles at high speeds, to engage in hazardous activities related to crime prevention and crime suppression, and to respond to emergency situations while carrying out their regular patrol duties. I further understand that it is likely that one or all of these activities and hazardous occurrences will occur during the time that I am accompanying an Officer and am participating in the RIDE-ALONG PROGRAM and that the patrol car in which, and the Officer with whom, I am riding will become directly involved in one of the above-mentioned hazardous occurrences. I also understand that when the patrol vehicle in which I am riding, or the Officer with whom I am riding, becomes involved in, or is assigned to, a dangerous call or a perilous situation, I may, but not necessarily will, be dropped off at a specific location for the duration of the time required to respond to the dangerous call or perilous situation. I understand that there may be dangerous or perilous situations during which the Officer may not be able to drop me off for the duration of the time required to respond to the dangerous call or perilous situation. If, however, I am dropped off at a specific location as discussed above, I understand that I must, and hereby agree to, remain at that specific location until being retrieved by the Officer, the Officer's partner or another Police unit. I understand that the time during which I am waiting to be retrieved, the drop-off time, constitutes my ongoing participation in the RIDE-ALONG PROGRAM and that all representations herein are applicable to the entire time that I am participating in the RIDE-ALONG PROGRAM, including the "drop-off time."

In consideration of the City of Mountain View Police Department's acceptance of my application to participate in and allowing me to participate in the department's POLICE RIDE-ALONG PROGRAM, I, _____, intending to be legally bound hereby, for myself, my heirs, executors, administrators and assigns, hereby waive and release any and all rights and claims for damages I may have against the City of Mountain View, the City of Mountain View Police Department and their or its Officers, directors, trustees, administrators, boards, commissions, employees, managers, subcommittees, agents and/or representatives for any and all injuries suffered by me arising from whatever cause directly or indirectly connected with, related to or associated with my participation in the RIDE-ALONG PROGRAM. I attest that I am physically capable and fit to participate in the RIDE-ALONG PROGRAM. I understand and agree that medical and/or other services rendered to me by or at the insistence of any of the above parties is not an admission of liability to provide or continue to provide any such services and is not a waiver by any said parties of any rights herein.

I have read and understand everything written above and agree to be bound thereby.

Signature of Applicant

Date

Signature of Parent (if applicant under 18 years old)

Date

Police Ride-Along Request

Date of Application _____ May we contact via e-mail? ☐ YES ☐ NO
E-mail address _____

Complete Legal Name _____
Last First Middle

Home Address _____
Street City State Zip

Home Phone Number (____) _____ Work Phone Number (____) _____

Employer Address _____
Street City State Zip

Date of Birth _____ Age _____ Race _____ Sex _____ CA Driver's License or ID No. _____

Reason for Ride-Along (Check One):

- ☐ Reside or Work in the City of Mountain View
☐ Police Department Applicant (list position) _____
☐ School Project (list school and class) _____
☐ Citizen Police Academy
☐ Leadership Mountain View
☐ Relative/Friend to Officer (list relation) _____
☐ Other _____

Date/Time Preference _____ Officer Preference _____
(Allow 7-Day Time Frame) (Officer Name)

Signature _____ Date _____

Parent Signature _____ Date _____
(if rider under 18 years old)

APPLICANT: PLEASE READ AND SIGN REVERSE SIDE (RELEASE AND WAIVER). DO NOT WRITE BELOW THIS LINE.

DEPARTMENT USE ONLY

CII _____ DL _____ Local _____
(Initial Each if Clear)

Ride Scheduled: Date _____ Time _____

Shift/Team _____ Supervisor's Name _____

Approved: ☐ YES ☐ NO Supervisor's Initials _____ Date _____

Comment: _____

Ride Completed: ☐ YES ☐ NO Date _____

Officer's Name _____

Comment _____

OFFICER: COMPLETE BOTTOM PORTION AND RETURN TO CAI.